



Campaign Finance Section Financial Report

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees, and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

Full Organization Name: Friends of Mark Baker

Account Number: ***** Date of this Report: 09/02/2008

Reporting Period Start: 08/11/2008 Reporting Period End: 09/01/2008

Office: County Council - Sussex County / District 03

Check the box that applies to this report:

Primary Election	<u>X</u> 8-DAY	<u> </u> 30-DAY
General Election	<u> </u> 8-DAY	<u> </u> 30-DAY
Other Election	<u> </u> 8-DAY	<u> </u> 30-DAY
Special Election	<u> </u> 8-DAY	<u> </u> 30-DAY

 YEAR END

Final Organization Closing:	<u> </u> YES	<u>X</u> NO	Closing Date:	<u> </u>
Amendment:	<u> </u> YES	<u>X</u> NO		

I authorize that all information included in this Financial Report package is accurate and correct. I agree to abide by all rules and regulations regarding Campaign Finance and the election process in the State of Delaware. I understand that representatives from the Office of the State Election Commissioner will perform an audit of all information provided on this report.

TREASURER SIGNATURE _____ DATE _____

CANDIDATE SIGNATURE _____ DATE _____



STATEMENT OF ACCOUNT BALANCE

Account Number:	*****	Reporting Period:	08/11/2008 FROM	09/01/2008 TO
1. BEGINNING BALANCE (Ending Balance from last reporting period)				\$180.18
2. RECEIPTS:				
A. SCHEDULE A - TOTAL RECEIPTS				\$8,415.00
B. SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS				\$0.00
C. SCHEDULE D-1 - TOTAL LOANS RECEIVED				\$20,530.30
D. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS RECEIVED				\$0.00
E. SUBTOTAL (Total of A,B,C,D)				\$28,945.30
3. EXPENDITURES:				
F. SCHEDULE B - TOTAL EXPENDITURES				\$26,716.41
G. SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES				\$0.00
H. SCHEDULE D-2 - TOTAL LOAN PAYMENTS				\$0.00
I. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS PAID				\$0.00
J. SUBTOTAL (Total of F,G,H,I)				\$26,716.41
4. ENDING BALANCE (Beginning Balance plus 2E minus 3J)				\$2,409.07
5. VALUE OF NON-CASH ASSETS (From Schedule F)				\$0.00
6. VALUE OF DISPOSED/TRANSFERRED ASSETS (From Schedule G)				\$0.00
7. VALUE OF LOANS AT END OF PERIOD (Loan Balance From Schedule D-2)				\$25,000.00
8. CLOSE OUT BALANCE (Must equal zero if committee closed)				\$27,409.07



SCHEDULE A - TOTAL RECEIPTS

Account Number: ***** Reporting Period: 08/11/2008 09/01/2008
FROM TO

Itemize all receipts over \$100 for the reporting period. Receipts from sales of items must be itemized if they are over \$50. NOTE: If you receive funds from the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

RECEIPTS IN EXCESS OF \$100:

Date Received	Contributor Name	Contributor Mailing Address	Aggregate Amount	Amount Received
08/11/2008	John S Bonk	8 Winding Hill Drive, Hockessin, DE 19707	\$250.00	\$250.00
08/11/2008	Dennis J Hughes	403 Main Sail Lane, Milton, DE 19968	\$100.00	\$100.00
08/11/2008	R.W. Durham	P.O. Box 655, Laurel, DE 19956	\$100.00	\$100.00
08/11/2008	John F Bushey	412 Behringer Avenue, Milton, DE 19968	\$100.00	\$100.00
08/12/2008	Rebecca L Lockwood	201 West Side Drive, Rehoboth Beach, DE 19971	\$600.00	\$600.00
08/12/2008	William L Berry	30811 Edgewater Drive, Lewes, DE 19958	\$100.00	\$100.00
08/14/2008	Frank E Gramer	1290 Welsh Road, Warrington, PA 18976-1955	\$500.00	\$500.00
08/14/2008	Mary L Gramer	1290 Welsh Road, Warrington, PA 18976-1955	\$500.00	\$500.00
08/14/2008	Ronald W Moore	P.O. Box 447, Georgetown, DE 19947	\$300.00	\$300.00
08/14/2008	Laura D Hill	32740 Webbs Landing Road, Lewes, DE 19958	\$250.00	\$250.00
08/14/2008	Baxter Farms, Inc.	23073 Zoar Road, Georgetown, DE 19947	\$500.00	\$500.00
08/15/2008	Conaway Associates, Inc.	105 Delaware Avenue, Bridgeville, DE 19933	\$300.00	\$300.00
08/15/2008	Terry F Kopple	20146 Harbeson Road, Harbeson, DE 19951	\$100.00	\$100.00
08/19/2008	Coast Survey, Inc.	P.O. Box 117, Nassau, DE 19969	\$100.00	\$100.00
08/19/2008	Kevin E Burdette	26177 Deep Branch Road, Milton, DE 19968	\$600.00	\$600.00
08/21/2008	Pep Up, Inc	P.O. Box 556, Georgetown, DE 19947	\$300.00	\$300.00

08/21/2008	Lachall Lee, LLP	17563 Nassau Commons #6, Lewes, DE 19958	\$600.00	\$600.00
08/22/2008	Colonial East, LP	30769 Lewes-Georgetown Hwy, Lewes, DE 19958	\$600.00	\$600.00
08/19/2008	Hammer & Nails Club	1600 N. Little Creek Road, Dover, DE 19901-1520	\$600.00	\$600.00
08/25/2008	Thetavest, Inc.	30045 Eagles Crest Road, Milton, DE 19968	\$600.00	\$600.00
08/27/2008	Mark Davidson	18072 Davidson Drive, Milton, DE 19968	\$600.00	\$600.00
08/28/2008	Alfred C Anderson	1 Bryan Drive, Rehoboth Beach, DE 19971	\$200.00	\$200.00
08/28/2008	William J Strickland	30 Emerson Drive, Dover, DE 19901	\$250.00	\$250.00
TOTAL RECEIPTS IN EXCESS OF \$100				\$8,150.00
TOTAL RECEIPTS NOT IN EXCESS OF \$100				\$265.00
GRAND TOTAL RECEIPTS (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2A)				\$8,415.00



SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES

Account Number: *****

Reporting Period: 08/11/2008
FROM

09/01/2008
TO

Itemize all goods and services expended at no charge or less than fair market value in excess of \$100 for the reporting period. NOTE: If you pay in-kind expenditures to the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

IN-KIND EXPENDITURES IN EXCESS OF \$100:

(NOTE: ESTIMATED VALUE EXPENDED IS FAIR MARKET VALUE LESS ANY PAYMENTS YOU RECEIVED FOR THE GOODS OR SERVICES)

Date Expended	Payee Name	Payee Mailing Address	Description of Expenditure	Est. Amount Expended
TOTAL EXPENDITURES IN EXCESS OF \$100				
TOTAL EXPENDITURES NOT IN EXCESS OF \$100				
GRAND TOTAL EXPENDITURES (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3G)				



SCHEDULE D-1 - LOANS RECEIVED

Account Number: ***** Reporting Period: 08/11/2008 09/01/2008
FROM TO

All loans in excess of \$50 **RECEIVED DURING THIS REPORTING PERIOD** should be itemized on this schedule. NOTE: These loans must also be listed on Schedule D-2.

LOANS RECEIVED IN EXCESS OF \$50:

Date Received	Lender	Endorser	Description of Security	Int. Rate	Amount Received
08/15/2008	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Unsecured	0.00%	\$20,530.30
TOTAL LOANS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2C)					\$20,530.30



SCHEDULE D-2 - LOANS

Account Number: ***** Reporting Period: 08/11/2008 09/01/2008
FROM TO

All outstanding loans in excess of \$50 must be listed. This includes loans from Lending Institutions, Candidates Personal Funds and Other Contributors.

LOANS IN EXCESS OF \$50:

Date Rec'd	Lender	Endorser	Description	I n t Rate	Orig. Loan Amt	Payments Made	Balance
07/23/2008	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Unsecured	0.00%	\$1,013.00	\$0.00	\$1,013.00
08/06/2008	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Unsecured	0.00%	\$145.42	\$0.00	\$145.42
08/07/2008	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Unsecured	0.00%	\$3,311.28	\$0.00	\$3,311.28
08/15/2008	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Mark W Baker 3 Brittany Lane, Lewes, DE 19958	Unsecured	0.00%	\$20,530.30	\$0.00	\$20,530.30
TOTAL LOANS (TOTAL PAYMENTS MADE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 3H. TOTAL LOAN BALANCE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 7.)					\$25,000.00	\$0.00	\$25,000.00



SCHEDULE E - EXPENSE REIMBURSEMENTS

Account Number: *****

Reporting Period: 08/11/2008
FROM

09/01/2008
TO

All expense reimbursements received by you and paid by you must be itemized.

REIMBURSEMENTS RECEIVED (Monies paid to you as reimbursements for expenses you incurred.)

Date Received	Reimburer	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2D.)					

REIMBURSEMENTS PAID (Monies paid by you to reimburse others for expenses they incurred.)

Date Paid	Payee	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS PAID (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3I.)					



SCHEDULE F - NON-CASH ASSETS

Account Number: *****

Reporting Period: 08/11/2008
FROM

09/01/2008
TO

Itemize all non-cash assets owned by the organization including those paid for by the organization, lent to the organization and contributed to the organization.

LIST ALL NON-CASH ASSETS

Date Received	Description of Asset	Location of Asset (Physical Address)	Value of Asset
TOTAL ASSET VALUE (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 5.)			



SCHEDULE G - ELIMINATION OF ASSETS

Account Number: *****

Reporting Period: 08/11/2008
FROM

09/01/2008
TO

Itemize all non-cash assets disposed of, transferred or sold by the organization during the reporting period.

LIST ALL ELIMINATED ASSETS

Date Eliminated	Description of Asset	Disposition of Asset	Value Received
TOTAL ASSETS ELIMINATED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 6.)			